Please refer to 5
Line Instruction
EPA Form #760-12 before
completing this form. The
information requested here is
required by law (8ection 3010 of
the Resource Conservation and

Notification of egulated Waste Activity

Date Received (Follows Eule Only)

required by lew (Section 2010 of the Recovery Act). United States Environ Recovery Act).	mental Protection Agency	FEB 2 2 2000
I. Installation's EPA ID Number (Mark 'X' In the appropriate box)		
A. Initial Notification B. Subsequent Notification	C. Installation's E	
(Complete Item C)	IAD191814	569319
II. Name of installation (include company and specific site name		
Great AmericaN	Outdoor	
III. Location of installation (Physical address not P.O. Box or Ro	ute Number)	
Street		
10100 Dennis Dr	ive	
Street (Continued)		
City or Town	State Zip Code	
	F 4503	
urpandale	1 1 1 1 1 5 10 13	12121111
County Code County Name		
17/17/POITRI I I I I I		
IV. Installation Mailing Address (See Instructions)		
Street or P.O. Box		
101100 Dennis Dr	ive	
City or Town	State Zip Code	
Urbandale	IA503	32-
V. Installation Contact (Person to be contacted regarding wast	activities at site)	387727 27.0433
Name (Last)	(First)	
Bufflington	FAIT	
Job Title	Phone Number (Area Code and I	Number)
Shop manager	515-253-	GODE
VI. Installation Contact Address (See instructions)	21/13/-18/2/3/	121010151
A. Contact Address		
Location Mailing B. Street or P.O. Box		
City or Town	State Zip Code	
VII. Ownership (See instructions)		
A. Name of Installation's Legal Owner		
DON Van Houwellir	19	
Street, P.O. Box, or Route Number	3	
PO BOX 575		
City or Town	State Zip Code	
	TA 76-	220-111
Place Alumber (Area Code and Alumber) B. Land Ty	ce C. Owner Type D. Change of C	Owner (Date Changed)
Phone Number (Area Code and Number)	Indicator	
515-465-5681 P	P	No 040195

EPA Form 8700-12 (Rev. 10/09/96)

- 1 of 2 -

RCRIS data entered by Con NowCC on 222 00



RCRA RECORDS CENTER

C. Other Wastes. (State or other wastes requiring a handler to have an LD, number: See instructions.)

Alango /

X. Certification

Signature

XL Comments

il Brandle

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and Official Title (Type or print)

10

12

Date Signed

1.250

Cardelyk**os**kor

Please print or type with ELITE-tipe (12 characters per inch) in the unshaded areas only

Please refer to Section V. Line-by-Line instructions for Completing EPA Form \$700-12 before completing this form. The information requested here is required by lew (Section 3010 of the Resource Conservation and Recovery Act).

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)

FEB 2 2 2000

Hacovery Act.	DDANCE
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)	
A. Initial Notification B. Subsequent Notification	C. Installation's EPA ID Number
(Complete Item C)	LIAID1918141516191311191
II. Name of installation (include company and specific site name)	
Great AmericaN Ou	t do 0 1 1 1 1 1 1
III. Location of installation (Physical address not P.O. Box or Route Numb	ber)
Street	
10100 Dennis Driv	e
Street (Continued)	
City or Town	State Zip Code
Urbandale	IA50322-
County Code County Name	11.300000
77 Dalk	
IV. Installation Mailing Address (See Instructions)	
Street or P.O. Box	A DATE OF STATE OF ST
10/100 Dennib Driv	State Zip Code
City or Town	State Zip Code
Urbandalle	11/4/5/0/3/2/-
V. Installation Contact (Person to be contacted regarding waste activities	s at site)
Name (Last) (First)	·
BuffingtoN Ed	
Job Title Phone	Number (Area Code and Number)
Shop Manager 51	5-253-9005
VI. Installation Contact Address (See instructions)	
A. Contact Address Location Mailing B. Street or P.O. Box	
	, , ,
City or Town	State Zip Code
VII. Ownership (See instructions)	
A. Name of Installation's Legal Owner	
DON Van Houwelling	
Street, P.O. Box, or Route Number	
PO BAX 575	
POBOX 575	State Zip Code
City or Town	State Zip Code
City or Town Perry	

1. Generator (See instructions) a. Greater than 1000(g/mo (2;200 lbs.) b. 100 to 1000 kg/mo (220-2;200 lbs.) c. Less than 100 kg/mo (220 lbs) 7. Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 2. Transportation 3. Treater, Storet, Disposer (at installation) Note: A permit is negative	Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions. Hazardous Waste Fuel a. Generator Marketers to Surner b. Other Marketers c. Boilerand/or Industrial Furnace 1. Smelter Deferral 2. Small Quantity Exemption	B. Used Oil Recycling Activities 1. Used Oil Recycling Marketer a. Marketer Directs Shipment of Oil to Off-Specification Burner b. Marketer Who First Claims the Used Oil Meets the Specificati Used Oil Burner - indicate Type(coff Combustion Device a. Utility Boiler b. industrial Boiler
A. Hazardous Waste Activity B. Used Oil Recycling Activities a. Generator (See instructions) a. Greater than 1000kg/mo (2200 lbs.) b. 100 to 1000 kg/mo (220-2200 lbs.) c. Leas than 100 kg/mo (220 lbs.) Transporter (Indicate Mode in boxs 1-5 below) B. For own waste only B. For commercial purposes Mode of Transportation 1. Air 2. Small Quantify Exemption 1. Air 3. Highway 4. Water 5. Other - specify 4. Water 5. Other - specify A. Characteristics of Nonlisted Hazardous Wastes. (New additional sheets if increasery) A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.) B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)	Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions. Hazardous Waste Fuel a. Generator Marketers to Surner b. Other Marketers c. Boilerand/or Industrial Furnace 1. Smelter Deferral 2. Small Quantity Exemption	B. Used Oil Recycling Activities 1. Used Oil Recycling Marketer a. Marketer Directs Shipment of Oil to Off-Specification Burner b. Marketer Who First Claims the Used Oil Meets the Specification 2. Used Oil Burner - Indicate Type(off Combustion Device a. Utility Boller b. Industrial Boller
A. Hazardous Waste Activity E. Used Oil Recycling Activities a. Generator (See instructions) a. Greater than 100kg/mo (2;200 lbs.) b. 100 to 1000 (g/mo (2;200 lbs.) c. Lass than 100 kg/mo (220 lbs.) Transporter (Indicinis Mode in boxs 1- 5 below) a. Generator (See instructions) c. Lass than 100 kg/mo (2;200 lbs.) Transporter (Indicinis Mode in boxs 1- 5 below) a. Generator Marketers C. Boiler and/or industrial Furnace 1. Smelter Deferral 2. Small Quantity Exemption 1. Air 2. Small Quantity Exemption 1. Indicate Type of Combustion Device(s) 3. Highway 4. Water 5. Other - specify A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.) B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)	Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions. Hazardous Waste Fuel a. Generator Marketers to Surner b. Other Marketers c. Boilerand/or Industrial Furnace 1. Smelter Deferral 2. Small Quantity Exemption	B. Used Oil Recycling Activities 1. Used Oil Recycling Marketer a. Marketer Directs Shipment of Oil to Off-Specification Burner b. Marketer Who First Claims the Used Oil Meets the Specification 2. Used Oil Burner - Indicate Type(off Combustion Device a. Utility Boller b. Industrial Boller
a. Greater than 1000(g/mo (2/200 lbs.) installation) Note: A permit is required for this activity, see la. 100 kg/mo (2/20-2/200 lbs.) installation) Note: A permit is required for this activity, see la. 100 kg/mo (2/20 lbs.) instructions. la. 2	installation) Note: A permit is required for this activity, see instructions. Hazardous Waste Fuel a. Generator Marketers b. Other Marketers c. Boilerandfor Industrial Furnace 1. Smelter Deferral 2. Small Quantity Exemption	a. Marketer Directs Shipment of Oil to Off-Specification Burner b. Marketer Who First Claims the Used Oil Meets the Specification Used Oil Burner - Indicate Type(off Combustion Device) a. Utility Boller b. Industrial Boller
B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions If you need to list more than 12 waste codes.)	Device(s) 1. Utility Solier 2. Industrial Solier 3. Industrial Furnace Underground Injection Control al sheets if necessary) tes. (Mark 'X' in the boxes correspondes; See 40 CFR Parts 261.20 - 261.	2. Used Oil Transporter - Indicate Type(s) of Combustion Device(s) s. Transporter b. Transfer Facility 4. Used Oil Processor/Re-refiner-indicate Type(s) of Activity(les) a Process b. Re-refine anding to the characteristics of (24)
1 2 3 4 5 6		
	33; See Instructions If you need to lis	st more than 12 waste codes.)
7 8 9 10 11 12	3 4	5 6
7 8 9 10 11 12		
	9 10	11 12
C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number: See instructions.)	CYPEGO DE LOUIS	
3 4 5 6		
C. Other Wastes. (State or other wastes requiring a l		2. Incustrial Formace Underground Injection Control al sheets if necessary) Res. (Mark 'X' in the boxes correspondies; See 40 CFR Parts 261.20 - 261. (List specific EPA hexardous was contaminant(9)) 33; See Instructions if you need to list 3 4 9 10

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)